

Attorney Docket: 015389-003110US; 019/224P

**geron**

J. Michael Schiff, Ph.D.  
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*Facsimile Transmittal Sheet*

Date: May 7, 2004  
To: Art Unit 1635  
U.S. PATENT AND TRADEMARK OFFICE  
Fax #: (703) 872-9306  
From: J. Michael Schiff, Ph.D.  
Director of Intellectual Property

Page 1 of 15 (including cover and ending sheet)

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**OFFICIAL FILING**

◆ Transmittal  
◆ Supplemental Declaration Under  
37 CFR § 1.67  
for  
USSN 09/042,460  
Please enter this paper into the Patent File.

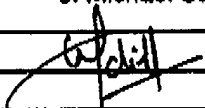
PTO/SB/21 (04-04)


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<b>TRANSMITTAL FORM</b> <i>(to be used for all correspondence after initial filing)</i>	Application Number	09/042,460	
	Filing Date	March 16, 1998	
	First Named Inventor	Gregg B. Morin, et al.	
	Art Unit	1636	
	Examiner Name	Sumesh Kaushal	
Total Number of Pages in This Submission	13	Attorney Docket Number	015389-003110US; 019/224P

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form (in duplicate) <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<b>Remarks</b> Supplemental Declaration Under 37 CFR 1.67 (12 pages)		
<b>SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT</b>		
Firm or Individual name	J. Michael Schiff, Registration No. 40,253	
Signature		
Date	May 7/04	

CERTIFICATE OF TRANSMISSION/MAILING		
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.		
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Signature		Date May 7 2004

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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# DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)

Declaration  
Submitted  
With Initial  
Filing

OR

Declaration  
Submitted after Initial  
Filing (surcharge  
(37 CFR 1.16 (e))  
required)

Attorney Docket Number

019/224P

First Named Inventor

Gregg B. Morin, et al.

COMPLETE IF KNOWN

Application Number

09/042,460

Filing Date

March 16, 1998

Art Unit

1636

Examiner Name

Sumesh Kaushal

## I hereby declare that:

Each inventor's residence, mailing address, and citizenship are as stated below next to their name.

I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Mouse Telomerase Reverse Transcriptase

(Title of the Invention)

the specification of which



is attached hereto

OR



was filed on (MM/DD/YYYY)

03/16/1998

as United States Application Number or PCT International

Application Number

09/042,460

and was amended on (MM/DD/YYYY)

01/09/2004

(if applicable).

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I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
			<input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

(Page 1 of 2)

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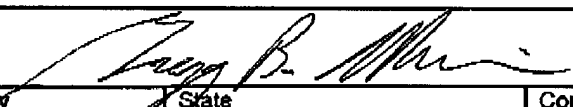

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**DECLARATION — Utility or Design Patent Application**

Direct all correspondence to: <input checked="" type="checkbox"/> Customer Number: <b>022869</b> OR <input type="checkbox"/> Correspondence address below			
Name			
Address			
City		State	ZIP
Country	Telephone	Fax	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			
NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Gregg B.		Morin	
Inventor's Signature		Date	
		1/29/04	
Residence: City	State	Country	Citizenship
Oakville	Ontario	Canada	United States
Mailing Address			
176 Blythe Cresc 			
City	State	ZIP	Country
Oakville	Ontario	L6J 5H6	Canada
NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Richard		Allsopp	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
			Canada
Mailing Address			
University of Hawaii at Manoa, Dept. of Anatomy & Reproductive Biology Institute for Biogenesis Research, 1960 East-West Road, East Annex E124			
City	State	ZIP	Country
Honolulu	Hawaii	96822	United States
<input checked="" type="checkbox"/> Additional inventors or a legal representative are being named on the ONE supplemental sheet(s) PTO/SB/02A or 02LR attached hereto.			

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**DECLARATION****ADDITIONAL INVENTOR(S)**  
Supplemental SheetPage 3 of 3

<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Ronald A.		De Pinho	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship United States
Mailing Address Dana-Farber Cancer Institute			
Mailing Address 44 Binney Street			
City Boston	State Massachusetts	Zip 02115	Country United States
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Roger A.		Greenberg	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship United States
Mailing Address Dana-Farber Cancer Institute			
Mailing Address c/o David Livingston Lab, 44 Binney Street			
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Mailing Address			
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PATENT APPLICATION  
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☐ Declaration  
Submitted  
With Initial  
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OR

☒ Declaration  
Submitted after Initial  
Filing (surcharge  
(37 CFR 1.16 (e))  
required)

Attorney Docket Number

019/224P

First Named Inventor

Gregg B. Morin, et al.

COMPLETE IF KNOWN

Application Number

09/042,460

Filing Date

March 16, 1998

Art Unit

1636

Examiner Name

Sumesh Kaushal

I hereby declare that:

Each inventor's residence, mailing address, and citizenship are as stated below next to their name.

I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Mouse Telomerase Reverse Transcriptase

(Title of the Invention)

the specification of which

☐ is attached hereto

OR

☒ was filed on (MM/DD/YYYY)

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as United States Application Number or PCT International

Application Number

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01/09/2004

(if applicable).

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				Yes	No
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			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Name			
Address			
City		State	ZIP
Country	Telephone	Fax	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			
NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) <b>Gregg B.</b>		Family Name or Surname <b>Morin</b>	
Inventor's Signature			Date
Residence: City <b>Oakville</b>	State <b>Ontario</b>	Country <b>Canada</b>	Citizenship <b>United States</b>
Mailing Address <b>176 Blythe Cresc</b>			
City <b>Oakville</b>	State <b>Ontario</b>	ZIP <b>L6J 5H6</b>	Country <b>Canada</b>
NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) <b>Richard</b>		Family Name or Surname <b>Allsopp</b>	
Inventor's Signature <i>Richard Allsopp</i>			Date <b>1/22/04</b>
Residence: City	State	Country	Citizenship <b>Canada</b>
Mailing Address <b>University of Hawaii at Manoa, Dept. of Anatomy &amp; Reproductive Biology Institute for Biogenesis Research, 1960 East-West Road, East Annex E124</b>			
City <b>Honolulu</b>	State <b>Hawaii</b>	ZIP <b>96822</b>	Country <b>United States</b>
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Given Name (first and middle [if any]) <b>Gregg B.</b>		Family Name or Surname <b>Morin</b>	
Inventor's Signature		Date	
Residence: City <b>Oakville</b>	State <b>Ontario</b>	Country <b>Canada</b>	Citizenship <b>United States</b>
Mailing Address <b>176 Blythe Cresc</b>			
City <b>Oakville</b>	State <b>Ontario</b>	ZIP <b>L6J 5H6</b>	Country <b>Canada</b>
NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
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Residence: City	State	Country	Citizenship <b>Canada</b>
Mailing Address <b>University of Hawaii at Manoa, Dept. of Anatomy &amp; Reproductive Biology Institute for Biogenesis Research, 1960 East-West Road, East Annex E124</b>			
City <b>Honolulu</b>	State <b>Hawaii</b>	ZIP <b>96822</b>	Country <b>United States</b>
<input checked="" type="checkbox"/> Additional Inventors or a legal representative are being named on the ONE supplemental sheet(s) PTO/SB/02A or 02LR attached hereto.			

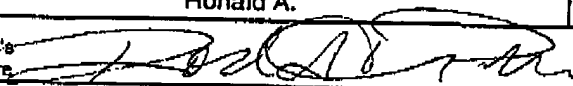
[Page 2 of 3]

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**DECLARATION****ADDITIONAL INVENTOR(S)**  
Supplemental SheetPage 3 of 3

<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Ronald A.		De Pinho	
Inventor's Signature 		Date <u>Mar 17 2004</u>	
Residence: City	State	Country	Citizenship
			United States
Mailing Address Dana-Farber Cancer Institute			
Mailing Address 44 Binney Street			
City	State	Zip	Country
Boston	Massachusetts	02115	United States
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Roger A.		Greenberg	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
			United States
Mailing Address Dana-Farber Cancer Institute			
Mailing Address c/o David Livingston Lab, 44 Binney Street			
City	State	Zip	Country
Boston	Massachusetts	02115	United States
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
Mailing Address			
City	State	Zip	Country

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**DECLARATION FOR UTILITY OR  
DESIGN  
PATENT APPLICATION  
(37 CFR 1.63)**Declaration  
Submitted  
With Initial  
Filing

OR

Declaration  
Submitted after Initial  
Filing (surcharge  
(37 CFR 1.16 (e))  
required)

Attorney Docket Number

019/224P

First Named Inventor

Gregg B. Morin, et al.

COMPLETE IF KNOWN

Application Number

09/042,460

Filing Date

March 16, 1998

Art Unit

1636

Examiner Name

Sumesh Kaushal

I hereby declare that:

Each inventor's residence, mailing address, and citizenship are as stated below next to their name.

I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Mouse Telomerase Reverse Transcriptase

(Title of the Invention)

the specification of which



is attached hereto

OR



was filed on (MM/DD/YYYY)

03/16/1998

as United States Application Number or PCT International

Application Number

09/042,460

and was amended on (MM/DD/YYYY)

01/09/2004

(if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				Yes	No
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2]

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## DECLARATION — Utility or Design Patent Application

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			
NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) <b>Gregg B.</b>		Family Name or Surname <b>Morin</b>	
Inventor's Signature		Date	
Residence: City <b>Oakville</b>	State <b>Ontario</b>	Country <b>Canada</b>	Citizenship <b>United States</b>
Mailing Address <b>176 Blythe Cresc</b>			
City <b>Oakville</b>	State <b>Ontario</b>	ZIP <b>L6J 5H6</b>	Country <b>Canada</b>
NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) <b>Richard</b>		Family Name or Surname <b>Allsopp</b>	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship <b>Canada</b>
Mailing Address <b>University of Hawaii at Manoa, Dept. of Anatomy &amp; Reproductive Biology Institute for Biogenesis Research, 1960 East-West Road, East Annex E124</b>			
City <b>Honolulu</b>	State <b>Hawaii</b>	ZIP <b>96822</b>	Country <b>United States</b>
<input checked="" type="checkbox"/> Additional inventors or a legal representative are being named on the <u>One</u> supplemental sheet(s) PTO/SB/02A or 02LR attached hereto.			

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44 Binney Street			
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Given Name (first and middle (if any))		Family Name or Surname	
Roger A.		Greenberg	
Inventor's Signature		Date	
<i>Roger A. Greenberg</i>		11/21/04	
Residence: City	State	Country	Citizenship
Boston	MA	USA	United States
Mailing Address			
Dana-Farber Cancer Institute			
Mailing Address			
c/o David Livingston Lab, 44 Binney Street			
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